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CONFIRMATION NO. 6349

<b>SERIAL NUMBER</b> 10/537,667	<b>FILING OR 371(c) DATE</b> 05/04/2006 <b>RULE</b>	<b>CLASS</b> 342	<b>GROUP ART UNIT</b> 3662	<b>ATTORNEY DOCKET NO.</b> 10191/3592
<b>APPLICANTS</b> Thomas Focke, Ahrbergen, GERMANY; Thomas Hansen, Hildesheim, GERMANY; Martin Schneider, Hildesheim, GERMANY; Joerg Schoebel, Salzgitter, GERMANY; Volker Gross, Bielefeld, GERMANY; Oliver Brueggemann, Ilsede, GERMANY;				
<b>** CONTINUING DATA ***** DP</b> This application is a 371 of PCT/DE03/03103 09/18/2003 <b>** FOREIGN APPLICATIONS ***** DP</b> GERMANY 102 56 524.4 12/04/2002				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 08/02/2006</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u>Allowance</u> Examiner's Signature <u>[Signature]</u> Initials		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 12
				<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 26646				
<b>TITLE</b> Device for measuring angle positions				
<b>FILING FEE RECEIVED</b> 1030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	